F24000001386

(Requestor's Name)	_					
(Address)	<u></u>					
(Address)	_					
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)	_					
(Document Number)						
Certified Copies Certificates of Status	_					
Special Instructions to Filing Officer:						

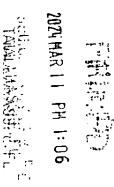




400422394224

01/23/24--01027--002 **70.00

-03/11/24--01005--003 **650.00



UND

COVER LETTER

TO:	Registration Section Division of Corporation				
	PEOPLE ISTANC				
SUBJ	ECT:	·•			
	-	Name of corporation	m - mu	st include suffix	
Dear S	Sir or Madam:				
"Certi	iclosed "Application by I ficate of Existence." or "C referenced foreign corpo	Certificate of Good St	inding"	and check are subr	
	return all correspondenc Carpenter	e concerning this matt	er to the	following:	
		Name o	f Persoi	1	
PEOPI	E IST INC.				
		Firm/Co	mpany		
3811 S	hipping Ave apt 801				
		Ado	lress		
Miami	.FL 33146				
		City/State	and Zip	r code	
dearpe	nter077@gmail.com				
	E-m	ail address: (to be used	l for fut	ure annual report n	otification)
For fu	rther information concert	ning this matter, please	call:		
David Carpenter		305	465-0778		
		at ()		
	Name of Person	Area Co	ide	Daytime Teleph	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Please	_		□ \$78.	TATE 75 Filing Fee & ified Copy	S87.50 Filing Fee, Certificate of Status of Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607-1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA PEOPLE IST INC. (Enter name of corporation; must include "INCORPORATED." "COMPANY." "CORPORATION." "Inc.," "Co.," "Corp." "Inc." "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 88-1529684 ARIZONA 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) 3/31/2022 (Date of duration, if other than perpetual) (Date of incorporation) 2/15/2023 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3811 Shipping Ave apt 801 Miami, FL 33146 (Principal office street address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box. NOT acceptable) David Carpenter Name: 3811 Shipping Ave apt 801 Office Address: Miami 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

A. DIRECTORS	David Carpenter							
□Chairman	Name:	□Chairman	Name:					
□Vice Chairman	Address:	□Vice Chairman	Address:					
■ Director		□Director						
□President		□President						
□Vice President		□Vice President						
□Secretary	□Treasurer	□Secretary		□Treasurer				
□Other	□Other	□Other		□Other				
□Chairman	Name:	□Chairman	Name:					
□ Vice Chairman	Address:	□Vice Chairman	Address:					
□Director		□Director						
□President		□President						
□Vice President		□Vice President		<u> </u>				
□Secretary	□Treasurer	□Secretary		□Treasurer				
□Other	Other	□Other	<u>-</u>	□Other				
Ed to	No		None					
□ Chairman	Name:	□Chairman □						
	Address:		Address:	<u> </u>				
□Director		□Director						
□President		□President	· · · ·					
□Vice President		□Vice President	-					
□Secretary	□Treasurer	□Secretary		□Treasurer				
□Other	□Other	□Other		□Other				
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.								
12	1 de							
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. David Carpenter								





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

PEOPLE IST INC.

ACC file number: 23354996

was incorporated under the laws of the State of Arizona on 03/31/2022;

That all annual reports owed to date by said corporation have been filed or delivered for filing, and all annual filing fees owed to date have been paid; and

That, according to the records of the Arizona Corporation Commission, said corporation is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. Thave hereunto set my hand, atfixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date. 01/11/2024

Douglas R. Clark, Executive Director

Angle R.Clark



